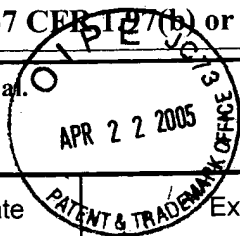


**TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT**  
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.  
03100199AA

In Re Application Of: Lidolt et al.



Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/798,845	3-12-04	unknown	30743	3738	5020

Title: ORTHOPEDIC AID WITH LOCKING DEVICE

Address to:  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**37 CFR 1.97(b)**

1. ☒ The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

**37 CFR 1.97(c)**

2. ☐ The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:
- ☐ the statement specified in 37 CFR 1.97(e);
- OR**
- ☐ the fee set forth in 37 CFR 1.17(p).

**TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT**  
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.  
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Application No. <b>10/798,845</b>	Filing Date <b>3-12-04</b>	Examiner <b>unknown</b>	Customer No. <b>30743</b>	Group Art Unit <b>3738</b>	Confirmation No. <b>5020</b>
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Title: **ORTHOPEDIC AID WITH LOCKING DEVICE**

**Payment of Fee**

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of \_\_\_\_\_ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **50-2041** as described below.
- ☐ Charge the amount of \_\_\_\_\_
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

**Certificate of Transmission by Facsimile\***

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. \_\_\_\_\_)

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(Date)

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Signature

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Typed or Printed Name of Person Signing Certificate

**Certificate of Mailing by First Class Mail**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on \_\_\_\_\_

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(Date)

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Signature of Person Mailing Correspondence

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Typed or Printed Name of Person Mailing Certificate

\*This certificate may only be used if paying by deposit account.

  
Signature

Dated: **4-22-05**

**Marshall M. Curtis**  
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Customer 30743

CC:

# INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

APR 22 2005

PATENT & TRADEMARK OFFICE

Docket Number (Optional)

03100199AA

Application Number

10/798,845

Applicant(s)

Lidolt et al.

Filing Date

3-12-04

Group Art Unit

3738

## U.S. PATENT DOCUMENTS

*EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	1	3,408,660	11-5-68	M. Walters			6-20-66
	2	5,840,047	11-24-98	Stedham			4-16-96
	3	4,685,926	8-11-87	Haupt			5-28-86

## U.S. PATENT APPLICATION PUBLICATIONS

*EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

## FOREIGN PATENT DOCUMENTS

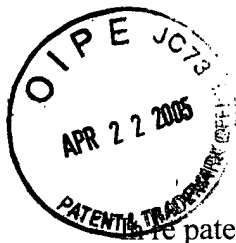
	REF	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	Translation	
							YES	NO
		0 141 640	5-15-85	Europe				✓

## OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)


EXAMINER

DATE CONSIDERED

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP Section 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re patent application of

Lidolt et al.

Serial No. 10/798,845

Group Art Unit: 3738

Filed: 3-12-04

Examiner: unknown

For: **ORTHOPEDIC AID WITH A LOCKING DEVICE**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT**

Sir:

Under the provisions of 37 C.F.R. 1.97 through 1.98 and pursuant to applicant's duty of disclosure under 37 C.F.R. 1.56, applicant respectfully brings the following documents, cited for the above- identified patent application and listed on the attached forms PTO-1449, to the attention of the Examiner in charge of the above-identified application

This citation does not constitute an admission that the references are relevant or material to the claims. They are only cited as constituting related art of which the applicant is aware.

It is respectfully requested that the listed references be formally made of record in the application. Please charge any deficiencies in fees and credit any overpayment of fees to Attorney's Deposit Account No. 50-2041.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Marshall M. Curtis". The signature is fluid and cursive, with the first name "Marshall" being the most prominent.

Marshall M. Curtis  
Reg. No. 33,138

Whitham, Curtis & Christofferson P.C.  
11491 Sunset Hills Road  
Suite 340  
Reston, Va 20190  
703-787-9400  
**Customer # 30743**

# INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

APR 22 2005

Docket Number (Optional)

03100199AA

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Applicant(s)

Lidolt et al.

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							YES	NO
		0 141 640	5-15-85	Eurpoe				✓

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